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Atty Docket No. 16869B-082900US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Patrick A. Darno

Group Art Unit 2163

OFFICIAL COMMUNICATION

MAIL STOP: AMENDMENT

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Kenji Yamagami, Application No. 10/627,507, filed July 25, 2003 for METHOD AND APPARATUS FOR SYNCHRONIZING APPLICATIONS FOR DATA RECOVERY USING STORAGE BASED JOURNALING are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1); Amendment (1); Petition for 1 MO. Extension of Time (2); and Return Postcard.

Number of pages being transmitted, including this page: 12

Dated: March 17, 2006


Alicia Martell

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|---|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/627,507 | |
| | Filing Date | July 25, 2003 | |
| | First Named Inventor | Yamagami, Kenji | |
| | Art Unit | 2163 | |
| | Examiner Name | Patrick A. Damo | |
| Total Number of Pages in This Submission | 11 | Attorney Docket Number | 16869B-082900US |

| ENCLOSURES (Check all that apply) | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | Townsend and Townsend and Crew LLP | | |
| Signature |  | | |
| Printed name | George B. F. Yee | | |
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